

# TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED  SUBJECT INFORMATION	1. DATE OF INCIDENT 11-SEP-2015	TIME 00:22:00	2. ADDRESS OF OCCURRENCE 4222 W CERMAK RD CHICAGO, IL 60623	3. LOCATION CODE 304	4. BEAT/OCUR 1012						
	5. POSITION 9161	6. LAST NAME ZAYAS	7. FIRST NAME ALBERTO H	8. STAR NO. 10661	9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F						
	10. RACE/CODE S	11. AGE 1977	12. HT 505	13. WT 168							
	14. DATE OF APT. 05-DEC-2005	15. EMPLOYEE NO. [REDACTED]	16. UNIT & BEAT OF ASSIGNMENT 010 1012R	17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off	18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	19. MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No					
	20. LAST NAME COOK	21. FIRST NAME ELI	22. M.I. O	23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	24. RACE BLK	25. D.O.B. 1979					
	26. HT 508	27. WT 165	28. ADDRESS 4225 W 21ST ST CHICAGO, IL 60623	29. TELEPHONE NO. [REDACTED]	30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No					
	32. SUBJECT ALLEGED INJURY? [REDACTED]	33. WHERE WAS MEDICAL TREATMENT OBTAINED? MOUNT SINAI HOSPITAL	34. BY WHOM? [REDACTED]	35. CONDITION <input type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Hospitalized	36. CHARGES PLACED 720 ILCS 550.0/4-A, 8-4-030, 720 ILCS 5.0/31-1-A	37. CB NO. 19185736					
	38. DNA	39. DNA	40. ADDITIONAL INFORMATION	37. CB NO. IR NO. 19185736	38. DNA						
	REASON FOR USE OF FORCE (Check all that apply)	PASSIVE REGISTER		ACTIVE REGISTER		ASSAULTANT/ASSAULT		ASSAULTANT/BATTERY		ASSAULTANT/DEADLY FORCE	
		SUBJECTS ACTIONS		DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/>		IMMINENT THREAT OF BATTERY <input type="checkbox"/>		ATTACK WITH WEAPON <input type="checkbox"/>		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/>	
STIFFENED (DEAD WEIGHT) <input type="checkbox"/>		FLED <input checked="" type="checkbox"/>		OTHER _____		ATTACK WITHOUT WEAPON <input type="checkbox"/>		WEAPON <input type="checkbox"/>			
OTHER _____		PULLED AWAY <input type="checkbox"/>		OTHER _____		OTHER _____		OTHER _____			
MEMBERS RESPONSE		MEMBER PRESENCE <input checked="" type="checkbox"/>		OPEN HAND STRIKE <input type="checkbox"/>		ELBOW STRIKE <input type="checkbox"/>		FIREARM <input type="checkbox"/>			
VERBAL COMMANDS <input checked="" type="checkbox"/>		TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/>		CLOSED HAND STRIKE/PUNCH <input type="checkbox"/>		KNEE STRIKE <input type="checkbox"/>		OTHER _____			
ESCORT HOLOS <input type="checkbox"/>		OC CHEMICAL WEAPON <input type="checkbox"/>		IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/>		IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		IMPACT WEAPON <input type="checkbox"/>			
WRISTLOCK <input type="checkbox"/>		CANINE <input type="checkbox"/>		OTHER _____		OTHER _____		OTHER _____			
ARMBAR <input type="checkbox"/>		TASER (Probe Discharge) <input checked="" type="checkbox"/>		TASER (Contact Stun) <input type="checkbox"/>		TASER (Stark Deployed) <input type="checkbox"/>		OTHER _____			
PRESSURE SENSITIVE AREAS <input type="checkbox"/>		OTHER _____		OTHER _____		OTHER _____		OTHER _____			
CONTROL INSTRUMENT <input type="checkbox"/>		OC CHEMICAL WEAPON <input type="checkbox"/>		WEAVER/WEAVER <input type="checkbox"/>		WEAVER/WEAVER <input type="checkbox"/>		WEAVER/WEAVER <input type="checkbox"/>			
OC CHEMICAL WEAPON <input type="checkbox"/>		WEAVER/WEAVER <input type="checkbox"/>		WEAVER/WEAVER <input type="checkbox"/>		WEAVER/WEAVER <input type="checkbox"/>		WEAVER/WEAVER <input type="checkbox"/>			
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WE											

## LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER, 2) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER, 3) ALL INCIDENTS INVOLVING THE DISCHARGE OF IMPACT MUNITIONS BY A DEPARTMENT MEMBER; 4) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STems FROM THE SAME INCIDENT DESCRIBED HERE IN 1 THROUGH 3.

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE  DNA  REFUSED  INTERVIEW NOT CONDUCTED (Specify Reason)

At 0515 Hrs, Subject Cook stated to R/Lt in the 010th District processing area that he was celebrating with friends and removed the bottle of alcohol, which Officer Zayas instructed him to not touch. He furthered that he then tried to flee on foot as the Officer told him to stop and was then struck by a taser.

76. LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

Based on the subject's admission and the Officer's sworn reports, R/Lt concludes that the Officer's actions were in compliance with Department procedures and directives.

77. LIEUTENANT OR ABOVE/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRN# 1077101 OBTAINED

78. LIEUTENANT OR ABOVE/OCIC (Print Name)

GILTMIER, BETH A

SIGNATURE

DATE COMPLETED

TIME

11-SEP-2015 05:22:29

79. TOTAL TRR's THIS EVENT No

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